

DECLARATION FOR NON-PROVISIONAL PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below at 201 et seq. beneath my name.

I believe I am the original, first and sole inventor if only one name is listed at 201 below, or an original, first and joint inventor if plural names are listed at 201 et seq. below, of the subject matter which is claimed and for which a patent is sought on the invention entitled

METHOD AND COMPOSITION FOR TREATMENT OF SKELETAL DYSPLASIAS

and for which a patent application is attached hereto.	on:	• .			
which is identified by docker	t No. 81408-4300				
□ was filed in the United State	s on	as Application	No		(declaration
not accompanying application	on) with amendment(s) filed on				(if applicable)
☐ was filed as PCT internation	al Application No.	on		(if applicable) and was amended	
under PCT Article 19 on			(if	applicable	2)
I hereby state that I have reviewe any amendment referred to above		f the above identified app	lication, includ	ding the clai	ms, as amended by
I acknowledge the duty to discle Regulations, § 1.56.	ose information known to me to	o be material to patentabi	lity as defined	l in Title 37	, Code of Federa
I hereby claim foreign priority be inventor's certificate listed below filing date before that of the app	w and have also identified belov	w any foreign application	of any foreig for patent or	n application	on(s) for patent or ertificate having a
EARLIEST FOREIGN AP	PLICATION(S), IF ANY, FIL	ED PRIOR TO THE FIL	ING DATE O	F THE AP	PLICATION
APPLICATION NUMBER	COUNTRY	DATE OF FILI (day, month, ye		PRIORIT	Y CLAIMED
00142118	Israel	March 20, 20	01	YES	□ NO
				1 YES	□ NO
I hereby claim the benefit under	Title 35, United States Code, §	§ 119(e) of any United Sta	ates provision	al application	on(s) listed below
PROVISIONAL APP	LICATION NUMBER		FILING DA	ATE	
60/276,939		March 20, 2001			
I hereby claim the benefit under subject matter of each of the claim the first paragraph of Title 35, Ut to patentability as defined in Title application and the national or F	ms of this application is not disc nited States Code § 112, I ackno e 37, Code of Federal Regulatio	closed in the prior United Sowledge the duty to disclosions, § 1.56 which became	States applicates information	ion in the m known to m	anner provided by e which is material
NON-PROVISIONAL FILING DATE			STATUS		
APPLICATION NO.		PATENTED	PENDIN	√IG A	ABANDONED
PCT/IL02/00229	March 20,,2002		X		

^{*} for use only when the application is assigned to a company, partnership or other organization.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

	FULL NAME OF	LAST NAME	FIRST NAME	MIDDLE NAME	
2	INVENTOR	GOLEMBO	Myriam		
	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
0	CITIZENSHIP		Israel	Israel	
1	POST OFFICE	STREET	CITY	STATE OR COUNTRY	ZIP CODE
1	ADDRESS	Moshav Netayim 113		Israel	76870
		SIGNATURE OF INVENTOR 201		DATE 16/12	103
				16/12	ده
			CID CT MANY	MIDDLE NAME	
_	FULL NAME OF	LAST NAME	FIRST NAME	MIDDLENAME	
2	INVENTOR	YAYON	Avner STATE OR FOREIGN COUNTRY	COLINTRY OF CITIZEN	SHIP
0	RESIDENCE &	CITY		COUNTRY OF CITIZENSHIP	
•	CITIZENSHIP	STREET	Israel	Israel STATE OR COUNTRY	ZIP CODE
2	POST OFFICE	Moshav Sitria # 104	Israel	Israel	76834
	ADDRESS		Israei		70834
		SIGNATURE OF INVENTOR 202	1 .	DATE	2 ~
		Anne Jaya		Dec. 16	, 2003
	FULL NAME OF	LAST NAME	FIRST NAME	MIDDLE NAME	
2	INVENTOR				
	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
0	CITIZENSHIP				
3	POST OFFICE	STREET	CITY	STATE OR COUNTRY	ZIP CODE
5	ADDRESS				
		SIGNATURE OF INVENTOR 203		DATE	
		·			
	FULL NAME OF	LAST NAME	FIRST NAME	MIDDLE NAME	
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0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
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4	POST OFFICE	STREET	CITY	STATE OR COONTRI	ZIF CODE
	ADDRESS		<u></u>	I DATE	
		SIGNATURE OF INVENTOR 204		DATE	
	FILL NAME OF	LAST NAME	FIRST NAME	MIDDLE NAME	
2	INVENTOR		·	·	
		CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
0	CITIZENSHIP				•
_	POST OFFICE	STREET	CITY	STATE OR COUNTRY	ZIP CODE
3	ADDRESS				
		SIGNATURE OF INVENTOR 205	<u> </u>	DATE	L
		,			
2 0 5	RESIDENCE & CITIZENSHIP POST OFFICE	CITY STREET	STATE OR FOREIGN COUNTRY CITY	COUNTRY OF CITIZEN	·



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Myriam GOLEMBO et al.

Confirmation No.3940

Application No.: 10/664,605

Group Art Unit: 1646

Filing Date: S

September 15, 2003

Examiner:

For:

METHOD AND COMPOSITION FOR

7 10001110

Attorney Docket No.: 81408-4300

TREATMENT OF SKELETAL DYSPLASIAS

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS [37 CFR 1.27(a)(2) - Small Business Concern]

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

Sir:

I hereby declare that I am

the owner of the small business concern identified below:

an official of the small business concern empowered to act in behalf of the concern identified below:

PROCHON BIOTECH LTD.
2 Holzman Street
Weizmann Science Park
P.O. Box 1482
76114 Rehovot
Israel

I hereby declare that the above identified small business concern qualifies as a small business concern as defined in 37 CFR 1.27(a)(2), for purposes of paying reduced fees under section 41(a) and (b) of Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the person employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern and/or there is an obligation under contract or law by the inventor(s) to convey rights to the small business concern with regard to the invention entitled:

METHOD AND COMPOSITION FOR TREATMENT OF SKELETAL DYSPLASIAS by Myriam GOLEMBO and Avner YAYON, described in Application No. 10/664,605 filed September 15, 2003.

NY:843987.1 - 1 -

If the rights held by the above identified small business concern are not exclusive, each individual, concern or organization having rights to the invention is listed below and no rights to the invention are held by any person, other than the inventor, who could not qualify as an independent inventor under 37 CFR 1.27(a)(1) if that person made the invention, or by any concern which would not qualify as a small business concern under 37 CFR 1.27(a)(2), or a nonprofit organization under 37 CFR 1.27(a)(3).

FULL NAME: ADDRESS:			
	☐ INDIVIDUAL	☐ SMALL BUSINESS CONCERN	☐ NONPROFIT RGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. [37 CFR 1.27 (g)]

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, and patent issuing thereon, or any patent to which this verified statement is directed.

Send correspondence to:

Allan A. Fanucci

WINSTON & STRAWN

200 Park Avenue

New York, NY 10166-491

Direct Telephone calls to: **WINSTON & STRAWN**

212-294-3311

Name of Person Signing:

Auner

Title other than Owner:

CEO, CSO Prochun Biotech

Address of Signer:

PROCHON BIOTECH LTD.

2 Holzman Street

Weizmann Science Park

P.O. Box 1482 76114 Rehovot

Israel

Date: Flbruary

NY:843987.1

- 2 -

^{*}NOTE: Separate verified statements are required from each named person, concern, or organization having rights to the invention averring to their status as small entities.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Myriam GOLEMBO et al. Confirmation No.:

Application No.: To be assigned Group Art Unit:

Filing Date: September 15, 2003 Examiner:

For: METHOD AND COMPOSITION FOR TREATMENT OF SKELETAL DYSPLASIAS

Attorney Docket No.: 81408-4300

POWER OF ATTORNEY BY ASSIGNEE AND EXCLUSION OF INVENTOR(S) UNDER 37 C.F.R. 3.71

Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

The undersigned assignee of the entire interest in the above-identified subject application hereby appoints Allan A. Fanucci (Reg. No. 30,256) and Daniel J. Hulseberg (Reg. No. 36,554) of WINSTON & STRAWN LLP (Customer No. 28765) to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith.

Please direct all correspondence for this application to Customer No. 28765 to the attention of Allan A. Fanucci (telephone 212-294-3311, facsimile 212-294-4700).

An assignment of the entire interest in the above-identified subject application is submitted herewith for recording and a copy is attached. The undersigned has reviewed this assignment and, to the best of his/her knowledge, title is in the assignee seeking to take action in this application and that he/she is empowered to act on its behalf.

ASSIGNEE:	PROCHON BIOTECH LTD.
Signature:	Ame Janan
Date of Signature:	Dec 16,2003
Typed Name:	Avner Yayon CEO, CSO ProChun Biotech
Position/Title:	Authorized Signatory
Address:	Kiryat Weizmann Science Park, PO Box 1482
	76114 Rehovot Israel

ASSIGNMENT

WHEREAS, WE,

Myriam GOLEMBO, a citizen of Israel, residing Moshav Netayim 113, 76870, Israel; and

Avner YAYON, a citizen of Israel, residing at 76834 Moshav Sitria #104, Israel.

ASSIGNORS, are the inventors of the invention METHOD AND COMPOSITION FOR TREATMENT OF SKELETAL DYSPLASIAS, for which we have executed an application for a Patent of the United States

	which is executed on even date herewith
\boxtimes	which is identified by Winston & Strawn Docket No. 81408-4100
\boxtimes	which was filed on September 15, 2003 as Application No. 10/664,605.

WHEREAS **PROCHON BIOTECH LTD.**, an Israeli corporate body having a place of business at the Kiryat Weizmann Science Park, P.O. Box 1482, 76114 Rehovot Israel, ASSIGNEE is desirous of obtaining our entire right, title and interest in, to and under the said invention and the said application:

NOW, THEREFORE, in consideration of the sum of One Dollar (\$1.00) to each inventor in hand paid, and other good and valuable consideration, the receipt of which is hereby acknowledged, each ASSIGNOR has sold, assigned, transferred and set over, and by these presents do hereby sell, assign, transfer and set over, unto the said ASSIGNEE, its successors, legal representatives and assigns, their entire right, title and interest in, to and under the said invention, and the said United States application and all divisions, renewals and continuations thereof, and all Patents of the United States which may be granted thereon and all reissues and extensions thereof;

And each ASSIGNOR hereby authorizes and requests the Commissioner of Patents and Trademarks of the United States, to issue the same to the said ASSIGNEE, its successors, legal representatives and assigns, in accordance with the terms of this instrument;

And each ASSIGNOR hereby covenants and agrees that they have the full right to convey the entire interest herein assigned, and that they have not executed, and will not execute, any agreement in conflict herewith;

And each ASSIGNOR hereby further covenants and agrees that they will communicate to the said ASSIGNEE, its successors, legal representatives and assigns, any facts known to them respecting said invention, and testify in any legal proceeding, sign all lawful papers, execute all divisional, continuing, and reissue applications, make all rightful oaths, and generally do everything possible to aid the said ASSIGNEE, its successors, legal representatives and assigns, to obtain and enforce proper protection for said invention;

And each ASSIGNOR hereby authorizes the ASSIGNEE's patent attorney to complete this form by the addition of the application number, application filing date, and attorney docket number, if necessary.

In witness whereof, each inventor has affixed their signature.

Date $\frac{ 6 2 @3}{}$, 2003
Myriam GOLEMBO
'
Witness arroand Maria GOVEN (2003, before me, Lilly Mazer
willess, appeared Wyriam GULENBO, to me known and known to me to be the norman of
that name, who signed the foregoing instrument, and acknowledged the same to be his/her free act and deed.
Witness Witness
witness / /
Date Dec 16 2003, 2003
Avner YAYON

On Dec 16 2003, 2003, before me, Cilly Glazev Witness, appeared Avner YAYON, to me known and known to me to be the person of that name, who signed the foregoing instrument, and acknowledged the same to be his/her free act

and deed.

EXPRESS MAIL LIST

To: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450



The following items listed below are being filed herewith with the USPTO on March 10, 2004

Express Mail No. EV 346 810 630 US			
Attorney Docket No.	Appln. Serial No./ Patent No.	Items - Documents filed on March 10, 2004	
81408-4300	10/664,605	Response to Notice to File Missing Parts of Nonprovisional Application; Executed Inventors' Declaration (2 pages); Copy of Notice; Copy of Application; Executed Power of Attorney by Assignee w/copy of Executed Assignment; Executed Verified Statement Claiming Entity	

Please acknowledge receipt of these items as received by returning the enclosed postcards with the date of receipt of March 10, 2004

NY:846497.7